MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

03 FEB 2006

SERIAL NO.	FILING DATE
10/539626	
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	✓						51						
2		✓					52						
3		⊘					53						
4		⊘					54						
5		⊘					55						
6		⊘					56						
7		⊘					57						
8		⊘					58						
9		⊘					59						
10		⊘					60						
11		⊘					61						
12		⊘					62						
13	✓						63						
14		⊘					64						
15		⊘					65						
16		⊘					66						
17		⊘					67						
18		⊘					68						
19		⊘					69						
20		⊘					70						
21		⊘					71						
22			✓				72						
23				✓			73						
24				✓			74						
25				✓			75						
26				✓			76						
27				✓			77						
28				✓			78						
29				✓			79						
30				✓			80						
31				✓			81						
32				✓			82						
33				✓			83						
34			✓				84						
35				✓			85						
36				✓			86						
37				✓			87						
38				✓			88						
39				✓			89						
40				✓			90						
41				✓			91						
42				✓			92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	2		2				TOTAL IND.						
TOTAL DEP.	19		19				TOTAL DEP.						
TOTAL CLAIMS	21		21				TOTAL CLAIMS						